

DRAFT RECLAMATION MANUAL RELEASE

Comments on this draft release must be submitted to asjerven@usbr.gov by January 11, 2016.

Background and Purpose of the Following Draft Directive and Standard (D&S)

The goal of preparing this new D&S document and providing stakeholders with the opportunity to comment on it in draft form is to consolidate guidance to proactively manage the Workers' Compensation (WC) Program in order to ensure injured workers receive all benefits to which they are entitled and concurrently protect the interests of Reclamation.

The Reclamation Manual is used to clarify program responsibility and authority and to document Reclamation-wide methods of doing business. All requirements in the Reclamation Manual are mandatory.

This draft addition to the Reclamation Manual is intended to (1) set forth the roles and responsibilities with regard to the WC Program; (2) describe the procedure for chargeback audits; (3) explain the elements of effective short and long-term case management; (4) establish a return-to-work program designed to return injured workers to full-time or part-time positions as soon as they are medically able to work; and (5) lay out training requirements for supervisors and WC coordinators.

Please note that this draft D&S for the WC Program is specifically limited to Reclamation employees, volunteers and others who are entitled to benefits under The Federal Employees' Compensation Act (FECA).

See the following pages for the draft D&S.

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Subject:	Workers' Compensation (WC) Program
Purpose:	This Directive and Standard (D&S) provides implementing instructions for the WC Program for the Bureau of Reclamation. The benefits of this D&S are to reduce costs and ensure benefits are provided to injured workers entitled to WC.
Authority:	The Federal Employees' Compensation Act (FECA) (5 U.S.C. 8101), Department of Interior policies "WC Cost Allocation Policy" (http://elips.doi.gov/elips/0/doc/3736/Page1.aspx); "Departmental Periodic Roll Case Management" (http://elips.doi.gov/elips/0/doc/3333/Page1.aspx); "Department of Interior's Quarterly OWCP Chargeback Reporting" (http://elips.doi.gov/elips/0/doc/3343/Page1.aspx); and "Departmental Policy on WC Return to Work Program" (http://elips.doi.gov/elips/0/doc/4111/Page1.aspx).
Approving Official:	Director, Policy and Administration (Director, POLICY).
Contact:	Human Resources (HR) Policy and Programs Division (HRPPD), 84-58000

1. **Introduction.** The WC Program is intended to provide benefits to Federal civilian injured workers who sustain a work-related injury or occupational disease while in the performance of duty. Proactively managing the WC Program is crucial in order to ensure injured workers receive all benefits to which they are entitled and concurrently protect the interests of Reclamation by reducing the number of lost work days and costs associated with WC by returning injured workers to work as soon as they are medically able.
2. **Applicability.** This D&S applies to all Reclamation permanent and temporary employees, and volunteers.
3. **Definitions.**
 - A. **Agency Query System (AQS).** A secure Internet site that provides access to information on Federal Employee Compensation injury claims. The information available includes current claims status, compensation payment history, and medical bill payment history.
 - B. **Challenge.** Formal administrative procedure through which Reclamation's management presents evidence to the Office of WC Programs (OWCP) where there is serious doubt as to the validity of an injured worker's on-the-job injury claim.
 - C. **Chargeback (CB).** System used by OWCP to bill the Department of Interior (the Department) for payments related to the OWCP-approved claims which the Department then charges to Reclamation.

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- D. **Compensation.** Benefits paid or payable under FECA, including money paid because of loss of wages, medical expenses, rehabilitation expenses, loss of use of major body functions, as well as death benefits to survivor(s).
- E. **Continuation of Pay (COP).** 45 Calendar days of wage loss paid to the injured worker due to disability and/or medical treatment after a traumatic injury, intended to avoid interruption of the employee's income while the case is being adjudicated.
- F. **Controversion.** Objection by the employer to paying COP for one of the 9 statutory reasons provided by regulation.
- G. **Disability.** Limitations on work status due to work-related injury.
- H. **Employees Compensation Operations and Management Portal (ECOMP).** Web-based application accessible via the OWCP's public Internet site for injured workers to electronically file wage loss claims (CA-7 and CA-7a), track the status of any form or document submitted via ECOMP, and electronically upload and submit documents to existing OWCP case files.
- I. **FECA.** FECA provides compensation benefits to civilian injured workers of the United States for disability due to injury or disease sustained while in the performance of duty.
- J. **Injured Worker.** Employee who sustains an injury or illness while in the performance of duty.
- K. **Leave Buy-Back.** Process when an injured worker using sick or annual leave for a job-related injury has the leave restored after paying the difference between the value of the leave received and FECA compensation.
- L. **Light Duty.** Also called "modified assignment or "limited duty", light duty is temporary or permanent alterations to an injured worker's regular duties when they are unable to perform regular duties due to a work-related injury.
- M. **Long-Term Care Cases.** Periodic roll cases on Temporary Total Disability (TTD) status, in which disability has exceeded, or is expected to exceed, 1 year on a continuous basis.
- N. **Loss of Wage Earning Capacity (LWEC).** Compensation based on the difference between the pre-injury and post-injury wages.
- O. **Medical Documentation.** Information or documentation signed by a medical doctor (MD) that describes the nature of the condition, expected duration of disability, and limitations on work status.

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- P. **Occupational Disease or Illness.** Also known as a “non-traumatic injury”, an illness or disease produced by systemic infections, conditions, or repeated stress or strain; exposure to toxins, poisons, or fumes; or other continued and repeated exposure to the work environment over a period greater than a single day or work shift.
- Q. **OWCP.** The office within U.S. Department of Labor (DOL)’s with overall responsibility for administration of FECA.
- R. **Partial Disability.** An injured employee who cannot return to the position held at the time of injury (or earn equivalent wages) due to the work-related injury, but who is not totally disabled from all work.
- S. **Periodic Roll.** Claims in which OWCP pays compensation every 28 days because the medical evidence indicates that disability is expected to continue for more than 60-90 days.
- T. **Reclamation WC Program Manager.** Employee assigned to oversee the WC Program at the Reclamation level, assigned to the HRPPD, POLICY.
- U. **Regional WC Coordinator (WCC).** Individual in each servicing HR office who oversees and is responsible for the administration of the WC Program for that region/office.
- V. **Regular Duty.** Performance of all physical requirements of the job without modification.
- W. **Safety Management Information System (SMIS).** Secure software program that allows the Department’s injured workers to complete CA-1 and CA-2 forms online and submit them via the Internet to the regional WCC, who will forward to OWCP.
- X. **Services for OWCP Accountability and Retirement Team (SOAR).** A team of human resources personnel at the Department dedicated to managing long-term WC cases for Reclamation.
- Y. **Suitable Employment.** Work within medical restrictions that injured worker is qualified to perform.
- Z. **Third Party Claim.** A claim in which the responsibility for injury to a Federal employee is a person or entity other than the Federal government.
- AA. **Traumatic Injury.** A wound or other condition of the body caused by external force, including stress or strain, caused by a specific event or series of events within a single day or work shift.

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BB. Vocational Rehabilitation. Services and/or training provided to an injured worker who suffers from a vocational disability due to a work-related injury or illness and who cannot resume usual duties.

4. Responsibilities.

A. Regional Directors, Directors, and Deputy Commissioners. Regional directors, directors, and deputy commissioners are responsible for:

- (1) ensuring staffing for regional WCC through their servicing HR offices is adequate to meet the WC Program requirements and ensure goals related to WC are met;
- (2) supporting Reclamation's return-to-work efforts; and
- (3) ensuring compliance with this D&S.

B. Director, POLICY. Director, POLICY is responsible for:

- (1) approving WC policy and guidance; and
- (2) ensuring Reclamation meets the Department's WC Program requirements.

C. Manager, HRPPD. The Manager, HRPPD is responsible for:

- (1) designating a Reclamation WC Program Manager; and
- (2) certifying the quarterly CB report.

D. Reclamation WC Program Manager. The Reclamation WC Program Manager is responsible for:

- (1) serving as Reclamation's representative on the Department's WC Council;
- (2) drafting and updating WC policy and guidance;
- (3) providing guidance and assistance to HR officers (HROs), regional WCCs;
- (4) providing information and training to regional WCCs regarding metrics-goals, progress, costs, and CB reports;
- (5) supporting regional WCCs return-to-work efforts;
- (6) tracking progress toward goals and sharing data with regional WCCs;
- (7) briefing HROs and the Director POLICY annually on metrics-goals, progress, and costs of the WC Program;

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- (8) managing accounts for regional WCCs for systems including ECOMP, SMIS, AQS, etc.;
- (9) developing and communicating Reclamation WC guidance;
- (10) representing Reclamation at Department meetings and conferences; and
- (11) serving as the subject matter expert on complex WC questions.

E. **HROs.** HROs are responsible for:

- (1) finalizing CB reports for their area of responsibility;
- (2) overseeing the regional WC Program; and
- (3) designating a regional WCC and ensuring adequate staff support for the regional WC Program.

F. **Regional WCC.** Regional WCCs are responsible for:

- (1) providing supervisors with information regarding the WC Program entitlements, COP, and compensation, etc.;
- (2) reviewing claims for completeness;
- (3) ensuring timely filing of claims for new injury/illness, and wage loss;
- (4) providing to supervisors the CA-16 authorizing medical care;
- (5) conducting fact-finding sessions, and controverting COP and/challenging WC claims when necessary;
- (6) providing the CA-16 authorizing medical care to the injured worker or treating physician when the supervisor is unable;
- (7) advising injured workers on their WC entitlements (COP, sick leave, annual leave, leave without pay (LWOP), Leave Buy Back, medical bills, etc.);
- (8) facilitating claims for injury and compensation;
- (9) representing Region/Office at meetings and conferences;
- (10) tracking COP to ensure it is used accurately and auditing COP as requested;
- (11) ensuring COP is reclaimed when claims are denied;

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- (12) submitting completed COP audit reports to the Reclamation WC Program Manager;
- (13) establishing OWCP case files and maintaining tracking and record system;
- (14) utilizing OWCP's automated system, i.e., ECOMP to electronically file wage loss claims;
- (15) utilizing the Department's automated system (SMIS) for new/injury illness claims;
- (16) ensuring records are kept in accordance with OWCP's requirements;
- (17) verifying accuracy of wages and benefits information in AQS for all new claims on periodic or daily rolls;
- (18) conducting quarterly CB audits to ensure all injured workers on the CB report are appropriately charged to the accurate organizational code;
- (19) conducting yearly CB audit to ensure OWCP charges are accurate for the region/office;
- (20) responding timely to inquiries by injured workers, supervisors, OWCP, and long-term case managers (i.e., the Department's SOAR for WC concerns);
- (21) completing training as required in Paragraph 13. Training Requirements, A. Regional WCC Training Requirements;
- (22) training supervisors on WC Program responsibilities and requirements;
- (23) acting as Reclamation's representative to the injured worker, treating physician, and OWCP Claims Examiner, vocational rehabilitation counselors, etc.;
- (24) proactively returning injured workers to work by coordinating with supervisors to make job offers and light duty job offers/alternative work assignments as soon as possible;
- (25) ensuring WEC is established for injured workers who partially recover;
- (26) coordinating with safety office and briefing the HRO as needed about the status of WC Program, trends, costs, and return to work efforts in the regional WCC's region/office;
- (27) notifying the Reclamation WC Program Manager of cases of serious injury or death; and
- (28) coordinating status updates on long-term cases with SOAR.

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- G. **Safety and Health Program Managers.** Safety and health program managers are responsible for providing the Reclamation WC Program Manager with data regarding the types and location of injuries sustained in the performance of duty.
- H. **Supervisors.** Supervisors are responsible for:
- (1) ensuring a safe work environment for injured workers;
 - (2) completing the training as outlined below in Paragraph 13. Training Requirements, B. Supervisory Training Requirement;
 - (3) immediately notifying the regional WCC of new injury/illness claims;
 - (4) ensuring injured workers receive proper medical care;
 - (5) reviewing and signing claims for work related injuries/illness of injured workers in the SMIS within the time frames established;
 - (6) investigating claims, including third-party aspects of any claim, and submitting all information gathered;
 - (7) timely completing Supervisor Portion of OWCP forms;
 - (8) ensuring time and attendance is properly completed;
 - (9) maintaining personal contact with injured workers during time away from work;
 - (10) assisting injured workers in returning to work as soon as possible by developing and offering limited duty when work capacity exists;
 - (11) coordinating with the regional WCC to inform injured workers of WC entitlements (COP, LWOP, etc.);
 - (12) offering light duty assignments to injured workers who have the medical ability to work whenever it is possible to do so, and having injured worker sign the Alternative Work Assignment and provide a copy to the regional WCC and the injured worker;
 - (13) investigating incidents and reporting potential fraudulent claims;
 - (14) challenging WC claims and controverting COP when it is supported by evidence; and
 - (15) keeping the regional WCC informed of status of claims, concerns, and potential problems.
- I. **Injured Workers.** Injured workers are responsible for:

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- (1) reporting any workplace safety hazard to their supervisor immediately;
 - (2) reporting a work-related injury or illness to their supervisor and filing the information in SMIS as soon as practical;
 - (3) seeking medical treatment;
 - (4) informing physician of the availability of light duty;
 - (5) providing medical evidence for all periods of disability and leave for medical appointments;
 - (6) informing supervisor of any medical limitation or restrictions, in writing, from treating physician;
 - (7) accepting light duty if medically able;
 - (8) working within medical restrictions, and avoiding activities that aggravate the injury or illness;
 - (9) taking an active role in managing claim;
 - (10) seeking damages from a third party (individual, a company or a product manufacturer) if requested by OWCP;
 - (11) coding timesheet correctly (administrative leave, COP, LWOP);
 - (12) completing appropriate leave requests; and
 - (13) returning to regular duty as soon as medically able.
5. **FECA.** FECA is the exclusive remedy for Federal workers suffering a work related injury/illness. All related medical care including first aid, physician services, surgery, hospitalization, drugs and medicines, orthopedic, prosthetic, and other appliances and supplies are covered under FECA. OWCP administers FECA (20 CFR Part 10).
6. **Short-Term Case Management.**
- A. **New Injury/Illness Claims.** Injured workers will use SMIS to electronically file form CA-1, Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation, and form CA-2, Notice of Occupational Disease and Claim for Compensation. Once a claim is submitted by an employee in SMIS, it must be submitted to OWCP within 14 calendar days.
- (1) **Traumatic Injury.** Injuries that occur in one workshift are considered "traumatic injuries" and claims are filed using the form CA-1. Some injuries do not require any medical treatment. The employee can choose whether to file a claim and

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must indicate on the CA-1 form whether the form is to be sent to OWCP. If the employee does not seek treatment and there is no lost time from work, the employee can elect to have the form filed in their medical folder and not sent to OWCP.

- (a) **Injuries Requiring Immediate Medical Treatment.** Supervisors should send forms CA-16 and CA-17 with injured workers seeking immediate medical treatment. In an emergency, those forms can be faxed to the provider within 48 hours. The CA-16 authorizes payment and must be safeguarded. The supervisor may not issue a CA-16 form more than one week after the occurrence of claimed injury. The supervisor must complete their portion of Form CA-16 and CA-17 before giving to the injured worker and must never give injured workers a blank form.
- (b) **Duty Status Report (CA-17).** Supervisors provide this form to the injured worker for the purpose of obtaining a medical duty status report from the treating physician. The supervisor specifies, on the form, the usual physical work requirements of the injured worker's job. If the injured worker is temporarily disabled, the provider would notify supervisor of restrictions by completing side B of the CA-17.
- (c) **Timecard Coding for Traumatic Injury (CA-1).**
 - (i) **Administrative Leave (Pay Code 060).** On the day of the injury, time away from work should be coded as administrative leave, unless the injury occurred before the shift began.
 - (ii) **COP (Pay Code 160).** An injured worker is entitled to receive up to 45 days of COP when he or she is absent from work due to disability and/or medical treatment following a traumatic injury, and/or based on the supporting medical documentation. The intent is to avoid interruption of pay while the claim is adjudicated. After entitlement to COP ends, the injured worker may apply for compensation or use leave. COP is subject to taxes and all other usual payroll deductions.
 - (aa) **Entitlement.** To use COP, the traumatic injury must be reported within 30 days and the absence must begin within 45 days after the injury. Within 10 days of the time loss due to injury, injured worker must provide medical evidence or COP will be terminated.
 - (bb) **COP from Subsequent Injuries.** COP may be used for each accepted claim. Subsequent injuries in the same leave calendar year must be coded appropriately as the second, third (up to 11th) COP occurrence. If COP entitlement occurs at the end of the leave calendar and COP continues into the new leave calendar year, all COP associated with that injury should be coded the same (i.e., if it

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is the first occurrence, continue to use that code for all COP associated with that injury).

- (cc) **Tracking.** The regional WCC will track COP to determine the number of days remaining. The regional WCC will advise supervisors and injured workers on eligibility and remaining COP days.
 - (dd) **COP and Claims Denied by OWCP.** COP must be reclaimed for claims that are denied. Regional WCCs must have the time card changed from COP to sick leave, annual leave, or LWOP (which creates a debt) at the choice of the employee.
 - (iii) **When COP Expires.** When COP expires, if disability continues, the injured worker may elect sick leave, annual leave, or LWOP. If LWOP is selected, the injured worker may file a claim for wage loss in ECOMP filing a CA-7. The timecard code for LWOP to be paid by OWCP for WC claims is 162. If the injured worker elects sick or annual leave, they may be entitled to “buy back” the leave used for work-related injuries (See C. Leave Buy Back, below).
 - (2) **Occupational Disease and Claim for Compensation (CA-2).** Injured workers filing claims for occupational disease or illness are not entitled to COP, nor payment for medical or compensation until the claim is accepted. Injured workers claiming an occupational disease or illness must use annual, sick, or LWOP until claim is accepted by OWCP. Once a claim is accepted, an injured worker may file claims for medical expenses, wage loss, and leave-buy back.
- B. Claims for Wage Loss.**
- (1) **Electronic Filing of Wage Loss Claims.** Injured workers with approved claims and lost wages due to injury (evidenced from treating physician and LWOP on timecard) will use ECOMP (www.ecomp.dol.gov) to electronically file form CA-7, Claim for Compensation. Form CA-7a, Time Analysis Form, must also be completed when dates for leave are intermittent or when more than one period of leave is claimed. Signed paper claim forms for wage loss (CA-7) will not be accepted from injured workers by the regional WCC. Injured workers with limited access to the internet or unfamiliarity with the process can set up time with the regional WCC, in person or by phone, to complete the forms electronically.
 - (2) **Supervisory Review in ECOMP.** The injured worker is asked to provide an email address for his or her supervisor. A hyperlink will be sent to the provided email for the second stage of the approval process. Regional WCCs may elect to have all CA-7s routed to them as supervisor and must inform injured workers

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filing claims for wage loss to input the regional WCC's email address, not the supervisor's.

- (3) **Agency Reviewer.** After the supervisor or designee reviews and approves the claim, it is signed electronically and electronically transferred to the regional WCC (referred in ECOMP as the Agency Reviewer) for final approval and electronic submission to OWCP.
 - (4) **Timely Filing of Claims for Wage Loss.** To avoid extended periods of pay loss, employee should file claims for wage loss as soon as possible after time lost due to injury. The regional WCC must submit claim to OWCP within 7 calendar days (5 working days) of electronic submission by the injured worker.
 - (5) **Claims for Anticipated Wage Loss.** Claims for wage loss must only be submitted for time already lost due to injury. For anticipated future wage loss, such as planned surgery, the injured worker may complete the paper forms (signed but not dated) and provide the forms to the regional WCC to complete as directed by the injured worker (bi-weekly, for example), to ensure compensation during periods of disability.
- C. **Leave Buy Back.** Injured workers who elect to use sick or annual leave during their period of disability to avoid interruption of income, may claim compensation for the period of disability and "buy back" the leave used within 1 year from return to work or 1 year from the claim acceptance, whichever is later. The maximum amount of time to be repurchased is 2 years. Injured workers may not repurchase leave used during the COP-eligible period. Leave used for medical appointments is not considered a period of disability and may not be re-purchased. Because sick and annual leave is paid at 100% of an employee's regular pay, and OWCP compensation is paid at 2/3 or 3/4 of an employee's pay, the employee will be required to pay the difference to Reclamation before leave can be re-credited to the employee's account. Leave buy back is effected by the following:
- (1) **Injured worker Initiates Request.** An injured worker may initiate a request for leave buy back by completing the employee portion of the CA-7b Claim for Compensation and 7a Time Analysis Form (if leave to be bought back was intermittent); and itemizing the dates, hours, leave used and evidence of disability for the time periods claimed. Injured worker submits the form(s) (unsigned) in hard copy to the regional WCC.
 - (2) **Regional WCC Prepares for Estimate of FECA Entitlement.** The regional WCC verifies absences with timecards, medical information, and completes sections A, B, C, and D of form CA-7b and submits the forms to the Interior Business Center (IBC) for an estimate of FECA entitlement.
 - (3) **IBC Estimate for Leave Buy Back Offer.** IBC will calculate the estimate of FECA entitlement which consists of the base pay rate and any additional elements

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of pay multiplied by the compensation rate ($\frac{2}{3}$ or $\frac{3}{4}$) multiplied by the number of hours claimed on the CA-7b; and the amount due to the agency to repurchase the leave (sections I and II). IBC will return the CA-7b to the regional WCC to share with the injured worker.

- (4) **Election of Leave Buy Back.** The injured worker will indicate their acceptance or rejection of the buyback offer by checking the box in K or L of the CA-7b and signing and dating the document. If leave buy back is elected, the regional WCC must fax the signed CA-7b to OWCP within 7 calendar days of employee's signature to avoid a late filing. If employee elects not to repurchase leave, the forms are filed in the compensation file (not submitted to OWCP).
 - (5) **OWCP Decision.** Upon receipt of the Leave Buy Back Forms, OWCP will verify that medical evidence supports entitlement for all hours claimed and the OWCP Claims Examiner will calculate the compensation payable. If that amount is within 10% of the estimate provided in the buyback offer, payment is issued to Reclamation.
 - (6) **Finance Office Sends Bill.** Once OWCP payment is received by the Finance Office, the Finance Office will send a letter with instructions and payment information to the injured worker specifying the amount injured worker owes Reclamation.
 - (7) **Leave Restoration.** The leave will be restored to the injured worker's leave and earnings statement when final payment by the injured worker is received by Reclamation's Finance Office.
7. **Long-Term Case Management.** Reclamation's long-term roll cases are managed at the Department-level by the SOAR team. Long-term periodic roll cases are defined as being in TTD status, in which disability has exceeded, or is expected to exceed, 1 year on a continuous basis.
- A. **Case Transfer.** Regional WCCs shall transfer to SOAR all death and periodic roll cases (as defined per the AQS). Death cases must not be transferred to SOAR until initial death benefit payment has been received by the beneficiary. Death cases in which there is no beneficiary receiving compensation payments are not transferred to SOAR. Case transfer will occur as follows:
- (1) Based on a quarterly review of the chargeback report generated from the SMIS system, SOAR will send to a list of cases to the Reclamation WC Program Manager that are in periodic roll status that need to be forwarded to SOAR for case management efforts.
 - (2) The Reclamation WC Program Manager will notify regional WCCs of any cases identified for transfer in their region/office.

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- (3) The regional WCC will copy the case file and physically transfer to the SOAR Team the original case file and available accompanying documentation within 30 calendar days of the request by SOAR.
 - (4) Cases may be transferred to SOAR prior to request (such as instances of serious injury), at the discretion of the regional WCC and with the Reclamation WC Program Manager's approval, if the TTD in the case is expected to exceed 1 year.
 - (5) Original case files will be shipped to the SOAR Team via FedEx. The SOAR Team will accept all shipments to their physical address.
 - (6) The regional WCC must log all cases transferred to the SOAR Team for future accountability and audit purposes. When any changes are made to the SOAR Transfer Log, the regional WCC will e-mail the Reclamation WC Program Manager a copy of the log in an editable format, i.e., excel spreadsheet (not pdf).
- B. Retaining Cases Requested for Transfer to SOAR.** With the Reclamation WC Program Manager's approval, eligible cases may be excluded from transfer and retained by the regional WCC if he or she is actively managing the case, or currently seeking return-to-work actions, or if transfer of the case would disrupt an ongoing investigation or litigation. The Reclamation WC Program Manager will monitor the status of retained cases and will require transfer of the case to SOAR if the reasons for granting the exclusion no longer apply
- C. Disposition of Documents Received After Case Transfer.** If the regional WCC receives any information, letters, documentation, regarding cases that were transferred to the SOAR Team, the regional WCC must send the documents to the SOAR Team and retain a copy with the duplicate file.
- D. Cost of Cases Transferred.** Reclamation remains responsible for CB on all cases transferred to the SOAR Team. The SOAR Team is responsible only for managing the cases transferred, retaining the case files, and transferring closed cases to the National Archive and Records Administration per the retention schedule.
- E. SOAR as Agent.** Once transferred to SOAR, the responsible SOAR specialist is the only person authorized to communicate with OWCP. The responsible SOAR specialist will represent Reclamation in all matters pertaining to case management. The SOAR Team will serve as a liaison to all interested parties, including (but not limited to): the injured worker, medical professionals, injured worker's representatives and attorneys, investigators, OWCP Claims Examiners, nurses, vocational rehabilitation counselors, injured worker's supervisor(s), the Reclamation WC Program Manager, and HR personnel.
- F. Case Status Updates on Cases Transferred to SOAR.** The SOAR Team will review each case using the same guidelines as OWCP, reviewing each case at least once a year

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or more often as needed, and provide a quarterly report to the Reclamation WC Program Manager, who will share the information with the regional WCCs.

- G. **Return of Cases From SOAR.** Case file(s) transferred to the SOAR Team will only be returned to the regional WCC upon reasonable justification (such as investigation or litigation, or recovery and return-to-work actions) by the Reclamation WC Program Manager.
 - H. **Return to Work of Injured Worker in Cases Transferred to SOAR.** When an injured worker is identified as having return-to-work potential, the SOAR Team and the Reclamation WC Program Manager will coordinate with the regional WCC to identify suitable work and make job offers. Job offers will be sent to the injured worker, in writing, by Reclamation (see 8. Return to Work below).
8. **Return to Work.** Reclamation has an active return-to-work program designed to return injured workers to full-time or part-time positions as soon as they are medically able to work. Reasonable accommodation, where necessary and required, will be used to help the injured worker return to work as soon as possible.
- A. **Medical Ability to Work in Some Capacity.** When an injured worker is determined to have some capacity to work, it is the responsibility of the original organizational unit to return the injured worker to a position compatible with the injured worker's current medical restrictions, including those not related to the injury.
 - B. **Job Offer Proximity.** It is Reclamation's responsibility to place the injured worker as close as possible to their home address or permanent duty location. If the original organizational unit is unable to place the injured worker because they do not have a position that can reasonably accommodate the current medical restrictions, then the regional WCC should work with the Reclamation WC Program Manager to place the injured worker as close as possible to the injured worker's home address. In some cases, the closest location may be outside the injured workers' original region. If the job offered is in a location other than where the injured worker currently resides, the regional WCC must document that no positions are available at any other Reclamation office/organization that is a shorter distance from the injured worker's residence than the location of the job offer. Pursuant to the OWCP regulations, an injured worker who relocates to accept a suitable job offer, after termination from the Reclamation's rolls, are entitled to reimbursement of moving expenses. Federal travel regulations can be used as a guideline to determine reasonable and necessary expenses.
 - C. **Responsibility of Charges.** When an injured worker is placed in a location outside of the organizational unit where the injury occurred, all costs associated with the injury will be paid by the organizational unit where the injury occurred. Expenses include relocation costs, salary at the new location, medical costs, lost time for medical appointments, etc. The originating office/organizational unit remains responsible for all costs until the injured worker is terminated from the OWCP rolls.

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- D. **Job Offers.** All job offers, alternative work assignments, and light duty assignments must be in writing and signed by the HRO. All job offers must include the following: work schedule; salary; job description; specific physical requirements of the job, including any special demands of the workload or unusual working conditions; organizational and geographical location of the assignment; date on which the job will be first available; work schedule (including telework); and date by which a response is required.

9. Cases of Serious Injury and Death.

- A. **Notification.** The Regional WCC must notify the Reclamation WC Program Manager and Regional Director (or equivalent) of all work- related deaths and serious injury. The WC Program Manager must notify the Manager, HRPPD and Director POLICY.
- B. **Death Cases.** The following steps must be completed in case of an employee's death due to work-related injury:
- (1) Regional WCC must complete and file form CA-6, Official Superior's Report of Employee's Death, immediately.
 - (2) Regional WCC must coordinate with HR benefits specialist to counsel survivors and provide beneficiaries with form CA-5. Regional WCC must complete the first page and survivors must have the second side completed by physician associated with the case in order to file a claim for death benefits from OWCP.
 - (3) Regional WCC must fax the CA-6 and CA-5/a to the OWCP Office with jurisdiction based on the decedent's home address. After a case number is assigned, regional WCC will need to request additional information from survivors (death certificate, marriage certificate, birth certificate for each child, divorce or death certificate for prior marriages, and itemized bills for reimbursement) and fax the information to OWCP in London, KY.
 - (4) Pursuant to Section 651 off Public Law 104-208, the personal representative of the decedent may be eligible for up to \$10,000 for burial costs and related out-of-pocket expenses for an employee who dies from an injury sustained in the line of duty. Amount is reduced by burial and termination payments from OWCP (typically \$1000). Requests for reimbursement should be sent to the Reclamation WC Program Manager.
- C. **Serious Injury.** In cases of serious injury, the following steps must be followed:
- (1) **Notify OWCP.** Regional WCC must contact the appropriate OWCP district office to submit the claim and request OWCP assign a nurse case manager, if appropriate, to ensure case is adjudicated quickly and charges are approved.

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- (2) **LWOP After 1 Year.** Seriously injured employees may remain on LWOP for up to 1 year. The regional WCC has flexibility to maintain the injured worker in LWOP status beyond one year if the medical evidence indicates an imminent return to work, and considering other factors such as the best interests of the injured worker, the likelihood of full recovery or need for accommodation.
 - (3) **Full Recovery in Less Than a Year.** Injured workers who fully recover in less than 1 year are entitled to be restored to their date of injury position.
 - (4) **Recovery After 1 Year.** If an injured worker recovers after one year, they are entitled to priority consideration, provided he or she applies for re-employment within 30 days after compensation ends.
 - (5) **Partial Recovery After 1 Year.** Injured workers who partially recover after 1 year remain entitled to wage loss compensation until they fully recover, or they are restored to earning capacity (capable of earning the same wages as their date of injury position).
10. **Annual CB.** The FECA program is financed by the Employee's Compensation Fund. The chargeback system is the mechanism by which the cost of compensation for work-related injuries and deaths are assigned to the employing agencies. Each year DOL furnishes the Department with a statement of payments made from the fund on behalf of the Department's injured workers.
- A. **The Chargeback Year.** The charges are billed 2 years in arrears (i.e., for FY2015 the bill received is for payments made by DOL in chargeback year 2012). The chargeback year runs July 1 to June 30 of each year. DOL bills the Department for all Department employees' WC costs. The Department's Office of the Secretary allocates the charges to the bureaus. Reclamation reimburses the Department and allocates the charges to the organization unit where the employee incurred the injury/illness.
 - B. **Allocating Charges.** A compensation claim is identified as belonging to a particular organizational unit (where the injured worker was employed at the time of injury) based on the organization code associated with the injured worker in FPPS, which is assigned when claims are filed in SMIS. All charges are reviewed quarterly so the charges on the annual CB, 2 years in arrears, have been verified as accurate or appropriately corrected during the Quarterly CB Audit.
 - C. **Allocating CB Costs to the Lowest Possible Organizational Level.** Pursuant to PB 12-06, D. WC costs shall be allocated to the organizational unit where the injured worker incurred the injury/illness regardless of where the injured worker is currently working. Exceptions can be made if the WC costs exceed \$5,000 or 1 percent of the salaries and benefits (whichever is greater) of the organizational unit.
11. **Quarterly CB Audit.** Each regional WCC will use SMIS to generate a quarterly report that provides a breakdown of cases and costs for which charges appear. This report is used to

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identify errors before the charges are due to DOL (2 years later). The regional WCC verifies the accuracy of the cases and responsible organizational unit.

- A. **Quarterly CB HRO Certification.** The quarterly CB accuracy or needed corrections must be certified (signed and dated) by the HRO of each region attesting to the thoroughness, quality, and timeliness of the audit. Appendix A, "Certification of Accurate Chargeback Report SAMPLE" or "Certification of Discrepancy Resolution Report SAMPLE" are signed by each HRO to document the result of the audit. The regional WCC sends the signed audit to the Reclamation WC Program Manager. The Manager, HRPPD signs each certification.
 - B. **Resolving Discrepancies in the Chargeback Report.** If an error is identified, the regional WCC must notify and provide documentation of the error to the Reclamation WC Program Manager. The Reclamation WC Program Manager requests corrections from OWCP or the Department and documents those requests.
 - C. **Audit Records Retention.** The Reclamation WC Program Manager must retain all signed CB certifications and associated documents for a minimum of 3 years.
12. **COP Audit.** In order to lessen the instances of COP being used inappropriately or beyond its expiration, COP usage will be audited quarterly.
- A. **Regional WCC Coordination with Supervisor for COP.** The regional WCC must notify the supervisor identified in new injury/illness claims of COP requirements. The supervisor must coordinate with their regional WCC prior to approving COP usage and approving timecards. In instances where light duty is medically authorized but not available to the injured worker, the supervisor must coordinate with the regional WCC and consider alternative light duty in another work area. If light duty is not available, then the supervisor must provide justification to the regional WCC for the usage of COP.
 - B. **Regional WCCs Audit of COP Usage.** A report detailing COP usage will be provided by the Reclamation WC Program Manager quarterly. The regional WCC will verify the accuracy of the COP usage and credits ensuring COP is authorized by the medical evidence, not expired, and if injured worker is medically able to work in some capacity that light duty was not available. Regional WCC will coordinate with the injured worker and the timekeeper to change any uses of COP which are not accurate.
13. **Training Requirements.**
- A. **Regional WCC Training Requirements.** Regional WCCs shall successfully complete the following training:
 - (1) Managing WC Cases, Finding Your Way Through the Maze, Parts 1 and 2 available through DOI Learn within 30 days of assignment of WC duties; and

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- (2) OWCP's Injury Compensation Specialist training within 6 months of assignment of WC duties; and
 - (3) Advanced Injury Compensation Specialist training (information is available on OWCP's Web site); attending a Federal WC's conference (or comparable conference); or repeating the OWCP's Injury Compensation Specialist training every 3 years, as a refresher.
- B. Supervisor Training Requirements.** Supervisors shall successfully complete the following training:
- (1) within 60-Days of Appointment, the training "WC Orientation for Supervisors," available online.
 - (2) Supervisors with a high likelihood of dealing with injured workers, such as those supervisors of trades, craft, and labor occupations (wage-grade employees) must take the training, "Supervisor's Guide to WC: Fact or Fiction;" or training provided by the regional WCC.
- 14. Record Keeping.** WC case files are the property of DOL, are considered confidential, and may not be released, inspected, copied or otherwise disclosed except as provided in the Freedom of Information Act and the Privacy Act of 1974 or under the routine uses provided by DOL/GOVT-1 (<http://www.dol.gov/sol/privacy/dol-govt-1.htm>), if such disclosure is consistent with the purpose for which the record was created.
- A. Case File Storage.** Case files must be secured at all times and must be maintained separately from the Employee Medical Folder (EMF) or Official Personnel Folder (see OPM Guide to Personnel Recordkeeping, <https://www.opm.gov/policy-data-oversight/data-analysis-documentation/personnel-documentation/personnel-recordkeeping/recguide2011.pdf>). However, a form CA-1 for no lost time or no medical expense is filed in the Employee Medical Folder. A notice of injury not filed with OWCP is to be placed in the employee's EMF a retained in accordance with OPM regulations governing disposal of the EMF.
- B. Limited Access.** Access to the WC case file is limited to Reclamation personnel with a specific and valid purpose for accessing the records, relating to the compensation claim. WC records may not be used for EEO complaints, disciplinary actions, or administrative actions without a signed Privacy Act waiver from the injured worker.
- C. Archive.** The OWCP Records Retirement Schedule requires that the case file material be maintained for 2 years after case closure. Two years after case closure, regional WCC should archive them in a file system separate from active files.
- D. Destroy.** DOL/GOVT-1 requires case files pertaining to a claim be destroyed 15 years after the case file has become inactive resulting in case closure. The files should be shredded. However, original CA-1, 2, and wage claims or other original forms faxed to

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OWCP are protected from destruction. The regional WCC must archive protected documents in a file system separate from active files or transfer them to OWCP.

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CERTIFICATION of DISCREPANCY RESOLUTION DEPARTMENT OF THE INTERIOR

Organization: IN07__

Chargeback Year _____, Quarter ____

Account: Region Name_____ Chargeback Code(s): _____

The attached chargeback report, as referenced above, has been reviewed and I hereby certify that the employees listed as filing OWCP claims are accurate for this account except for the discrepancy/ies as identified on the attachment. The U.S. Department of Labor has been notified of the required corrections.

Name Date

Workers' Compensation Coordinator

Name Date

Region Human Resources Officer

Name Date

Bureau Human Resources Officer

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CERTIFICATION of ACCURATE CHARGEBACK REPORT DEPARTMENT OF THE INTERIOR

Organization: IN07_____

Chargeback Year _____, Quarter _____

Account: Region Name_____

Chargeback Code(s): _____

The attached chargeback report, as referenced above, has been reviewed and I hereby certify that the employees listed as filing OWCP claims are accurate for this account.

Name Date

Workers' Compensation Coordinator

Name Date

Region Human Resources Officer

Name Date

Bureau Human Resources Officer